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The experience of therapeutic change for psychologists preparing to become psychotherapists

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Abstract

The present study aims to reveal the experience of therapeutical change and importance of emotional, experiential learning for a future psychotherapist. There are two research questions: how do psychologists preparing to become psychotherapists experience and make sense of therapeutical change, and how do they experience and make sense of the group experience. The study is of qualitative nature using Interpretative Phenomenological Analysis (IPA) as a research method and Psychodrama group therapy as an intervention method. Findings show a clear progress towards a more authentic and stronger self. Personal therapy is recommended as an essential component of a psychotherapy training program.

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1. Introduction

The study presented here brings into discussion the issue of personal therapy for psychotherapists, especially those preparing for a professional career in the field. Training programs in psychotherapy differ in relation to their requirements for personal therapy, which is either a compulsory or an optional condition. Most European countries require a specified number of hours of personal therapy in order to become an accredited or licensed psychotherapist. By contrast, in the United States only psychoanalytic training institutions and a few graduate programs require a course of personal therapy (Geller, Norcross & Orlinsky, 2008). Romania has aligned with the European standards and requires since the foundation of the Romanian Psychological College (2004) a minimum of 50 hours of personal therapy for counselors

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and 150 hours for psychotherapists, irrespective of their theoretical orientation. Some psychotherapy schools and approaches have even higher standards (e.g. psychoanalysis).

The present study aims firstly to reveal the experience of therapy and personal change through the voices of participants and their meaning-making for an in-depth understanding of the therapeutic process and experiential learning. Secondly, this paper introduces a relatively new qualitative method for the field of psychotherapy research in Romania, namely Interpretative Phenomenological Analysis (IPA) (Smith, 1996).

Literature and research on personal therapy of psychotherapists

The value of personal therapy for psychotherapists was recognized early on in psychoanalysis, beginning with Freud in 1910. He explained that no psychoanalyst goes further than his own complexes and internal resistances permit (Freud, 1999) and therefore considered personal therapy the deepest and most rigorous part of the clinicians education.

A large-scale study coordinated by the Collaborative Research Network of the Society for Psychotherapy Research beginning with 1990 included over 5000 therapists from 14 countries and different theoretical orientations and showed that 79% of therapists reported that they have undergone personal therapy (Geller et al., 2008). A very new study of personal psychotherapy among 3,995 therapists in 6 English-speaking countries showed that 87% of the overall sample embarked on personal therapy at least once: 94% of analytic/psychodynamic therapists, 91% of humanistic therapists, 73% of cognitive-behavioral therapists, 82% of the novice therapists to 89% of senior therapists (Orlinsky, Schofield, Schroder, Kazantzis, 2011).

The most relevant literature and research shows that personal therapy is a prerequisite to conducting psychotherapy and a co-requisite of self-care over one's professional career (Geller et al., 2008).

2. Methodology

This study uses a qualitative design to explore the topic of personal therapy of psychologists preparing for psychotherapy seeking to bring comprehension rather than explanation. The research questions are two: how do psychologists preparing to become psychotherapists experience and make sense of therapeutic change; how do they experience and make sense of the group experience. The therapeutic approach is psychodrama.

The study sample is comprised of 6 psychologists aspiring to become psychotherapists. The IPA method uses small sample sizes (four to ten) (Smith et al., 2009) and is strongly idiographic, focused on the study of the individual person and its subjective meanings of experiences. To ensure richness of research data, purposive sampling was used to select research participants. Criteria for inclusion referred to: psychologists, students or graduates aspiring to become psychotherapists; participation in 20-25 psychodrama sessions; members of different therapy groups; ended therapy recently (1 – 4 month). The sample profile resulted is: 4 students in their final year and 2 graduates; female between age 25 – 45; participation at an average of 24 psychodrama sessions; part of two different groups; recent ending of therapy (2 – 4 month).

Data were collected using phenomenological interviews and analyzed with IPA.

Referring to the traditional debate between quantitative and qualitative methods, Denzin and Lincoln (2011) argue that it is necessary to confront and work through the criticisms that continue to be directed to qualitative inquiry. Similar to quantitative research, the qualitative approach is subject to a set of guidelines for quality control to ensure more appropriate and valid scientific results. Among the different methods for credibility checks suggested by Elliot et al. (1999), the present study made use of multiple analysts (two), back-check with research participants and a verification step.

2.1. Interpretative Phenomenological Analysis

The method of Interpretative Phenomenological Analysis was introduced by Jonathan A. Smith (1996) in the field of health psychology. IPA can be described by three broad elements: an epistemological position, clear guidelines for conducting research and a corpus of empirical research. The term '*interpretative phenomenological analysis*' signals the dual nature of the approach: the phenomenological requirement to understand and '*give voice*', exploring the participant's inside view on the phenomenon under study, and the interpretative requirement to contextualize and '*make sense*' of these claims from a psychological perspective (Smith, Flowers, Larkin, 2009).

2.2. Psychodrama

Psychodrama therapy was founded by Jacob Levi Moreno in the early years of the 20th century and made a significant impact on the development of group psychotherapy. The method of psychodrama is based on theories of action, spontaneity and creativity. Essentially, it uses five elements: the scene, the actor / protagonist, the director / therapist, the auxiliary egos and auditory (Moreno, 2009). As an action method, psychodrama engages the person in a holistic way: body, mind and emotions. The protagonist enacts on the psychodrama scene his/her inner world, exploring parts of it with the support of group members which play the roles attributed (auxiliary ego).

3. Findings and discussions

The matrix which emerged from the IPA analysis of all research participants transcripts includes the following six themes: the group experience, the therapeutical journey, the experience of change, the authentic self, the experience of therapy and psychodrama method, the therapeutic relationship.

3.1. Phase one of IPA analysis: '*giving voice*' to the experiences of participants

While admitting that analysis is, unavoidably, an interpretative process, it tries to be as visible and recoverable as possible by use of the verbatim extracts (Smith et al., 2009). For reasons of space constraint, the section below presents very briefly all themes emerged.

The first theme '*the group experience*' describes how participants felt as being part of a therapy group. Participants needed, first of all, to feel secure and accepted by other members: "*It is an honor to be trusted. I have also offered trust to my colleagues*" (Maria). As they began to know each other by talking about their personal life, problems faced and feelings, a sense warmth and group cohesion developed over time. Disclosure and emotional relief were encouraged by a climate of trust and support, highly valued by all participants: "*the colleagues helped me change... to relive moments of my life, to show my feelings*" (Ioana). The process of identification and feed-back received from group members contributed to clarification and change. The feeling of being 'ordinary' had a significant positive impact.

The second theme '*the therapeutic journey*' is described by the following elements: the beginning: anxiety, uncertainty; holding back vs. openness; repression vs. emotional relief; judgmental vs. acceptance; self – knowledge; existential problems; the ending. The experience of beginning a group of therapy, with little information about the group activity was frightening for some members: "*...I didn't know how everything would go... I was scared not to be judged*" (Ioana). Although all participants were motivated for therapy, either for personal or professional reasons, opening up and letting go of the emotional tension was easier for some, compared to others: "*I couldn't conceive [...] me confessing... slowly, slowly I started to know the girls... and then I started to open myself*" (Carmen). A variety of

existential problems and traumatic events were exposed on the psychodrama scene (death, abortion, abuse, divorce, family conflicts), helping participants to deal with them emotionally and cognitively, and feel fully accepted by others. Past tensions such as those related to the family of origin were exposed, released and resolved. All members reported the development of self-knowledge: *“I tried to enter into some angles, corners... in which I did not probably enter before and I liked to enter and to know me better”* (Suzana). At the end of group therapy was a sense of sadness to end such special relationships.

The third theme *‘the experience of change’* is described by the elements: transformation; insight, clarification; *“I have learned...”*; own rhythm; personal power, value; *‘me’* before and after therapy; impact of change. All participants experienced personal transformation as Flavia stated: *“for me it was a very intense period of transformations [...] I have also taken some very personal decisions”*. They talked about themselves before and after therapy: *“It helped me to be another person...to see the world different”* (Carmen). Yet, change happened at diverse levels and with different rhythms. The therapeutic benefits reported referred to increased self-esteem, communication and emotional skills, self-control, acceptance of human differences, being non-judgmental, decision-making, and power. As change was observed by others, outside the therapeutic environment, there are premises for it to last.

The fourth theme *‘authentic self’* came to the forefront as one of the most significant therapeutic benefits for all participants: *“I can say that I am me again [...] that brave person, with self-confidence, without fear of being judged [...] I am simply ME”* (Ioana).

The fifth theme *‘the experience of therapy and psychodrama method’* reveals the power of experiential learning for becoming a therapist: *“It’s different when you read, you are told, but when you live it... I understood what healing means for a group”* (Mirela). The therapist has to be prepared to deal with various clients, life situations and trauma. Ioana underlines how the group experience increased her empathy and understanding of problems she has not faced personally: *“the death experience of a close person... or childhood trauma... I have not lived them, but there I felt what the others have been going through [...] if my clients would go through those things maybe... I’ll understand better”*. Psychodrama, as an action-based method, with role-playing as its main technique *„allows you to play with your life and arrange it the way you want it... so that things can get easier to model”* (Flavia).

The sixth theme *‘the therapeutic relationship’* describes the importance of this factor for psychotherapy: *“I felt this very strongly...the warm, the calm, the acceptance[...]it was the most important thing”* (Oana).

3.2. Phase two of IPA analysis: *‘making-sense’ of the experiences of participants*

The findings of this study confirm the power of group therapy acting through the therapeutic factors described by Yalom (Yalom & Leszcz, 2008). Research participants highlight how they experienced factors such as universality, group cohesiveness, altruism, socializing, interpersonal learning, catharsis, corrective recapitulation of the primary family group through psychodrama scenes, and existential factors.

The psychodrama method impacted on therapeutic change through the enactment of various existential situations in the roles of protagonist, auxiliary ego or the observer role and identification process as a member of the audience. The mechanisms of change described by Boria (1997) as active in a psychodrama group and leading to changes in people's functioning were emphasized in the experiences of our participants too: the interrelation between the *‘actor’* and *‘observer’* roles, and the restructuring of the way significant figures (mother, father, siblings, friends) in the life's of the participants were internalized. Role reversal, which is the main technique used in psychodrama, described by one participant as the experience of *“seeing through someone else's eyes”* (Suzana) appears to have had a huge impact on the participants. This reflects the finding of Kipper and Ritchie's (2003) meta-analysis of the effectiveness of psychodrama techniques, which demonstrate that role reversal is the most effective intervention.

One of the main benefits of therapy mentioned by our participants was the authentic encounter with self and others, the awareness, recuperation or acceptance of their authentic self. This could be seen as an emergent result of the curative group factors and psychodrama mechanisms of change. Spontaneity and creativity, the basis of psychodrama (Moreno, 2009), become manifest through 'playing', which encourages the expression of the holistic person, its complex inner world and authentic self.

Another change factor is the therapeutic relationship. Warmth, care, trust, support and guidance helped participants in their therapeutic journey. Lambert (2010) underlines the importance of the relationship between therapist and patient/client stating that psychotherapy, at its best, has a large and important interpersonal aspect that is even more significant than the type of intervention used.

Overall, personal therapy offered an insight into the role of therapist, the therapeutic process and mechanisms of change: "*it gave me the meaning of what a therapist really is and what therapy is all about*" (Otilia). Yalom and Leszcz (2008) state that group experience and the personal psychotherapeutic activity are essential components of the training program in order to become a group psychotherapist.

4. Conclusions

The contributions to self-development and change made by the interrelation of therapeutic group factors, psychodrama techniques and change mechanisms, therapeutic relationship, and motivation for change are vividly highlighted. Findings show a clear progress towards a more authentic and stronger self through a unique, transformative experience. There was the feeling that the experience of therapy enlarged their perspectives on human problems and their preparedness to empathize and deal with them. The IPA approach managed to bring an in-depth understanding and sense-making into the processes and mechanisms of change in psychotherapy and gain a sense of the transformational power of therapy. This experiential learning can be transferred later to the clients in the case of those becoming therapists.

While findings from this study are limited to the group investigated and can not be extended, existing research demonstrates the extraordinary commonality of personal therapy among psychotherapists, and encourage further use for professional training, clinical practice, and therapist self-care (Orlinsky et al., 2011). Our recommendation is that an in-depth personal therapeutically experience should be a precondition to become a therapist, to be taken into consideration by all therapy training schools.

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